

CHAPTER 13

BLOODBORNE PATHOGENS (BBP)

- 1301. General
- 1302. Applicability
- 1303. Responsibility
- 1304. Recommended BBP Protective Equipment
- 1305. Hepatitis B Virus Vaccine Declination Letter

26 JUL 2000

CHAPTER 13

BLOODBORNE PATHOGENS

1301. GENERAL

a. This chapter introduces Navy law enforcement and physical security personnel to the threat of infection from bloodborne pathogens (BBPs). Complete guidance of this topic should be obtained through knowledge of, and adherence to 29 CFR 1910.1030, Occupational Exposure to Bloodborne Pathogens; reference (1); local instructions; the installation safety officer, and medical department.

b. There is a tendency to think of BBPs in terms of Human Immunodeficiency Virus (HIV) and Hepatitis B Virus (HBV), but other infectious diseases, e.g., malaria/syphilis could be present in human blood. In addition to blood, law enforcement/security personnel should protect themselves against exposure to other blood products, human tissue, body organs, and bodily fluids.

c. The gravity of this subject can not be understated since exposure, without taking preventive measures/seeking immediate treatment, can be fatal.

1302. APPLICABILITY. This chapter applies to all law enforcement/security personnel, military and civilian, who engage in any one or more of the following activities:

- a. Patrol
- b. Investigations
- c. Evidence collection/processing/custodians
- d. Field supervision, including security officers/chiefs of police who might be called to crime scenes
- e. Brig duty
- f. Urinalysis coordination
- g. Other duty exposing law enforcement/security personnel to human blood, body fluids or tissues.

26 JUL 2000

1303. RESPONSIBILITY

a. Security Officer. The security officer shall coordinate all issues involving BBPs with the activity safety officer. These issues should include but not be limited to:

(1) Provide input for the Exposure Control Plan

(2) Ensure law enforcement/security personnel are trained in risk reduction from exposure to BBPs.

(3) Ensure all law enforcement/security personnel are offered HBV vaccine (at no charge to civilian employees), and if declined they are aware that they may receive the vaccine at any time in the future. In the event an individual declines after being offered the HBV vaccine, the declination must be in writing and filed per reference (1)/prevailing instruction from the installation safety officer.

(4) Establish procedures for immediate medical attention for security personnel exposed to BBPs or those thought to have been exposed to BBPs.

b. All Law Enforcement/Security Personnel. Personnel who perform the tasks identified in paragraph 13-2 may be exposed to BBPs. These tasks (and many too numerous to list) could place law enforcement/security personnel at risk, but as first responders, they would encounter a host of situations conducive to BBP exposure. At an absolute minimum, personnel must:

(1) Be aware of the risks incurred when exposed to BBPs.

(2) Receive or have been offered but declined, the HBV vaccine.

(3) Have issued to them/immediately available, sufficient protective equipment, and properly instructed in its use. Not all protective equipment is necessary under every circumstance. The risk level for exposure will dictate the level of protection necessary, e.g., in a pat-down search of a person a pair of latex/surgical type gloves may be required. If blood, urine or feces is apparent at the scene, gloves and other protective equipment may be necessary before conducting a body search.

(4) Be cautious in the handling and storage of evidence/contraband which may be infectious. Of great concern is being stuck by hypodermic needles. This may occur from:

(a) Search of persons

26 JUL 2000

(b) Search of vehicles, including police vehicles after transporting personnel placed in custody

(c) Search of premises, including lockers, closets, and other areas

(d) Recovery of lost/stolen property or during inventory of containers, e.g., suitcases, foot lockers, vehicle trunks, etc.

(e) Handling of stored evidence or while preparing evidence for shipment.

c. Extreme caution should be exercised when apprehending suspects who might intentionally inflict injury in order to infect the apprehending officer. This may occur by biting, scratching/attempting to throw or smear blood, saliva or bodily fluids on the apprehending officer.

1304. RECOMMENDED BBP PROTECTIVE EQUIPMENT

- a. Latex gloves
- b. Face mask - Fluid resistant
- c. Safety glasses - Clear with side guards and impact resistant
- d. Contamination control coveralls - With attached hood and boots
- e. Biohazard waste bags - Red color labeled "Infectious Waste" with international biohazard symbol, and
- f. Hand wipes - Antimicrobial.

1305. HBV VACCINE DECLINATION LETTER. A sample HBV declination may be found on page 13-4.

26 JUL 2000

-SAMPLE-

HEPATITIS B VACCINE
DECLINATION

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring Hepatitis B Virus (HBV) infection. I have been given the opportunity to be vaccinated with Hepatitis B vaccine, at no cost to me. However, I decline the Hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring HBV, a serious disease. If in the future I continue to have occupational exposure to blood or other potentially infectious materials and want to be vaccinated with Hepatitis B vaccine, I can receive the vaccination series at no charge to me.

Printed Name _____

Date _____

Signature _____

SSN _____